

## Application Data Sheet

### Application Information

Application Type:: Regular  
Subject Matter:: Utility  
Title:: DISC STABILIZATION SYSTEM  
Attorney Docket Number:: S01.12-0991/STL 11378.00  
Request for Non-Publication?:: No  
Suggested Drawing Figure::  
Total Drawing Sheets:: 6  
Small Entity?:: No  
Petition included?:: No  
Petition Type::

### Applicant Information

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Given Name:: Gary Edwin  
Family Name:: Bement  
Name Suffix::  
City of Residence:: Frederick  
State or Province of Residence:: CO  
Country of Residence:: US  
Street of Mailing address:: 521 Hawthorn Circle  
City of Mailing address:: Frederick  
State of Province of mailing address:: CO  
Country of mailing address::  
Postal or Zip Code:: 80530

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Given Name:: Michael David  
Family Name:: Mundt  
Name Suffix::  
City of Residence:: Longmont  
State or Province of Residence:: CO  
Country of Residence:: US  
Street of Mailing address:: 815 Vireo Ct.  
City of Mailing address:: Longmont  
State of Province of mailing address:: CO  
Country of mailing address::  
Postal or Zip Code:: 80501

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Given Name:: Paul  
Family Name:: Smith  
Name Suffix::  
City of Residence:: Niwot  
State or Province of Residence:: CO  
Country of Residence:: US  
Street of Mailing address:: 8432 Sawtooth Circle  
City of Mailing address:: Niwot  
State of Province of mailing address:: CO  
Country of mailing address::  
Postal or Zip Code:: 80503

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Given Name:: Mark Andrew  
Family Name:: Chapin  
Name Suffix::  
City of Residence:: Louisville  
State or Province of Residence:: CO  
Country of Residence:: US  
Street of Mailing address:: 338 Pheasant Run  
City of Mailing address:: Louisville  
State of Province of mailing address:: CO  
Country of mailing address::  
Postal or Zip Code:: 80027

#### **Correspondence Information**

Name:: David C. Bohn  
Street of mailing address:: Westman, Champlin & Kelly  
900 Second Avenue South, Suite 1600  
City of mailing address:: Minneapolis  
State or Province of mailing address:: MN  
Postal or Zip Code of mailing address:: 55402-3319  
Phone number:: 612/334-3222  
Fax number:: 612/334-3212  
E-Mail address:: dbohn@wck.com

#### **Representative Information**

Representative Customer Number::	000027365	
----------------------------------	-----------	--

**Domestic Priority Information**

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This application			MM/DD/YY

**Foreign Priority Information**

Country::	Application number::	Filing Date::	Priority Claimed::
		MM/DD/YY	Yes or No

**Assignee Information**

Assignee name:: Seagate Technology LLC  
Street of mailing address:: 920 Disc Drive  
City of mailing address:: Scotts Valley  
State or Province of mailing address:: CA  
Postal or Zip Code of mailing address:: 95066